

Contract Attorney Summary Claim Form CONFLICT CASES

Vendor ID #

Contract attorneys must attach an itemized invoice to this summary form. The invoice must detail services by assigned OPD client number and document dates, time spent, rate of pay, and a description of the activity. Attach a copy of the pre-approval notice for any pre-approved costs. OPD client numbers are assigned by the Regional Office. Separate summary forms must be prepared for non-conflict and appellate cases. All travel expenses reported on this claim are to be detailed on a travel expense voucher form by case number and attached to this claim form. Monthly office expense stipends are to be listed as the last line item on the form. Claimant must submit a monthly claim by the 10th of the month following the month in which costs were incurred. **Submit this claim to Larry Murphy, Contract Manager, 44 W. Park, Butte MT 59701. Please mail the original. We cannot accept faxes.**

[illegible]

The undersigned Counsel certifies that the cases listed, expenses claimed and the times reported are true and accurate.

Contract Manager's Approval/Date Approved

Signatures above certify that all costs in excess of \$200 have been pre-approved.

STATE OF MONTANA
OFFICE OF THE STATE PUBLIC DEFENDER
Contract Attorney Summary Claim Form
CONFLICT CASES

OPD 020607CAC